Colorado Secretary of State Elections Division 1700 Broadway, Ste. 200 Denver, CO 80290

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www.sos.state.co.us



REPORT OF CONTRIBUTIONS AND EXPENDITURES

(1,-45-108, C.R.S.)			
Full Name of Committee/Person:	As Show On Registration		
Address of Committee/Person:	2039 Chamon X	1, 42	
City, State & Zip Code:	1/21/10 8/65	→	
Committee Type:	in classical and		
Name and Address of Financial Institution	Alpine Bank		
SOS ID NUMBER	(state and county committees):		
Type of Report			
Regularly Scheduled Filing	5 .	380	
Amended Filing. This amend Submit changes or new informat			
Termination Report. (Termi	nation Reports MUST Have a Monetary Balance of 2	ero in Line 5)	
Check this box if this Repo	rt Contains Electioneering Communications	Information	
Reporting Period Covered:	1016/23 Through	10/22/23 Date	
Declared Total Spending (if applicable) [Art. XXVIII, Sec. 4(1)] [Art. XXVIII, Sec. 4(1)]			
		Totals Detailed Summary Page	
		10000 2000000 0000000000000000000000000	
1 Funds on Hand at the Beginning	of Reporting Period (monetary only)	\$ 165.68	
2 Total Monetary Contributions (li	ine 11)	\$ 165.68	
2 Total Monetary Contributions (iii) 3 Total of Monetary Contributions	ine 11) s & Beginning Amount (line 1 + line 2)	\$ 165.68	
 Total Monetary Contributions (I Total of Monetary Contributions Total Monetary Expenditures (Ii 	ine 11) s & Beginning Amount (line 1 + line 2) ne 19)	\$ 165.68 \$ 1000,00 \$ 1165.65 \$ 1053 \$ 18	
 Total Monetary Contributions (I Total of Monetary Contributions Total Monetary Expenditures (Ii 	ine 11) s & Beginning Amount (line 1 + line 2)	\$ 165.68	
 Total Monetary Contributions (I Total of Monetary Contributions Total Monetary Expenditures (Ii Funds on Hand at the End of Re 	ine 11) s & Beginning Amount (line 1 + line 2) ne 19)	\$ 165.68 \$ 1000,00 \$ 1165.65 \$ 1053 218 \$ 112.50	
2 Total Monetary Contributions (ii 3 Total of Monetary Contributions 4 Total Monetary Expenditures (ii 5 Funds on Hand at the End of Re The appropriate officer s Authorization (Must be completed penalty of perjury, that to the best of including any contributions received permissible sources.	ine 11) s & Beginning Amount (line 1 + line 2) ne 19) sporting Period (monetary) (line 3 - line 4) shall impose a penalty of \$50 per day for each	\$ 165.68 \$ 1000,00 \$ 1165.65 \$ 1853 218 \$ 112.50 day that a report is filed late. hereby certify and declare, under ed during this reporting period,	
2 Total Monetary Contributions (iii) 3 Total of Monetary Contributions 4 Total Monetary Expenditures (iii) 5 Funds on Hand at the End of Re The appropriate officer so Authorization (Must be completed penalty of perjury, that to the best of including any contributions received.	ine 11) s & Beginning Amount (line 1 + line 2) ne 19) sporting Period (monetary) (line 3 - line 4) shall impose a penalty of \$50 per day for each [Art. XXVIII Sec. 10(2)(a)] by either the Registered Agent OR the Candidate): If my knowledge or belief all contributions receive	\$ 165.68 \$ 1000,00 \$ 1/65.65 \$ 1853 18 \$ 1/2.50 day that a report is filed late. hereby certify and declare, under ed during this reporting period,	
2 Total Monetary Contributions (iii) 3 Total of Monetary Expenditures (iii) 5 Funds on Hand at the End of Re The appropriate officer s Authorization (Must be completed penalty of perjury, that to the best of including any contributions received permissible sources. Print Registered Agent's Name:	ine 11) s & Beginning Amount (line 1 + line 2) ne 19) sporting Period (monetary) (line 3 - line 4) shall impose a penalty of \$50 per day for each [Art. XXVIII Sec. 10(2)(a)] by either the Registered Agent OR the Candidate): If my knowledge or belief all contributions receive	\$ 165.68 \$ 1000,00 \$ 1165.65 \$ 165.65 \$ 165.65 \$ 165.3218 \$ 112.50 day that a report is filed late. hereby certify and declare, under ed during this reporting period, a membership organization, are from	
2 Total Monetary Contributions (III) 3 Total of Monetary Expenditures (III) 5 Funds on Hand at the End of Research The appropriate officer of the Authorization (Must be completed penalty of perjury, that to the best of including any contributions received permissible sources. Print Registered Agent's Name: Registered Agent's Signature:	ine 11) s & Beginning Amount (line 1 + line 2) ne 19) sporting Period (monetary) (line 3 - line 4) shall impose a penalty of \$50 per day for each [Art. XXVIII Sec. 10(2)(a)] by either the Registered Agent OR the Candidate): If my knowledge or belief all contributions receive	\$ 165.68 \$ 1000,00 \$ 1165.65 \$ 165.65 \$ 165.65 \$ 165.3218 \$ 112.50 day that a report is filed late. hereby certify and declare, under ed during this reporting period, a membership organization, are from	

a a	DETAILED SUMMARY	
Full Name of Committee/Person:	JACK BERGEY	N. B
Current Reporting Period:	7 / / 2 3 Through /	2/22/22

		ii
Funds	on hand at the beginning of reporting period (Monetary Only)	\$ \$ 365, 68
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$\$ 1000
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ 0
8	Loans Received (Please list on Schedule "C")	s O
9	Total of Other Receipts (Interest, Dividends, etc.)	\$ \(\)
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$ (
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 1500.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ O k
13	Total Contributions (Line 11 + line 12)	\$ 1,000.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 1053,18
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ 0
16	Loan Repayments Made (Please list on Schedule "C")	\$ 0
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$ 6
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$ 400
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$ 1053,18
20	Total Spending (Line 18 + line 19)	\$ 1453.18

RGBGFull Name of Committee/Person: _ WARNING: Please read the instruction page for Schedule "A" before completing! PLEASE PRINT/TYPE 1. Date Accepted 4. Name (Last, First): Address: 2. Contribution Amt. 6. City/State/Zip: 7. Description: _/' 8. Employer (if applicable, mandatory): Check box if 9. Occupation (if applicable, mandatory): Electioneering Communication 1. Date Accepted 4. Name (Last, First): 5. Address: 6. City/State/Zip: 7. Description: 8. Employer (if applicable, mandatory): Check box if 9. Occupation (if applicable, mandatory): Electioneering Communication 1. Date Accepted 4. Name (Last, First): 5. Address: Contribution Amt. 6. City/State/Zip: 3. Aggregate Amt. * 7. Description: 8. Employer (if applicable, mandatory): Check box if 9. Occupation (if applicable, mandatory): Electioneering Communication 1. Date Accepted 4. Name (Last, First): 5. Address: 6. City/State/Zip: 7. Description: 8. Employer (if applicable, mandatory): Check box if 9. Occupation (if applicable, mandatory): Electioneering Communication * For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVIII, Sec. 3(3); Political Committee Art. XXVIII, Sec 3(5); Small Donor Committee Art.

XXVIII, Sec. 2(14).

Schedule A – Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Schedule B – Itemized Expenditures Statement (\$20 or more) [1-45-108(1)(a), C.R.S.]

Full Name of Committee/Person: ACK BERGEY				
2. Amount \$ 444 40 3. Recipient is (optional): Committee Non-Committee	4. Name: RIME 5. Address: 2211 N. FRONTAGE W SWE CWH3 6. City/State/Zip: VAIL, CO 81657 7. Purpose of Expenditure: MEET & GREET Check box if Electioneering Communication 4. Name: BOB COSTELLO			
2. Amount	5. Address: HOSTING DIVISION, COM			
\$ HOO 3.Recipient is (optional): Committee Non-Committee	6. City/State/Zip: NO Physical Address 7. Purpose of Expenditure: Website Cveation Check box if Electioneering Communication			
1. <u>Date Expended</u> 10 19 23 2. <u>Amount</u>	4. Name: Copy Copy 5. Address: 147 Begwer Creek Plaza			
\$ 58%;)% 3.Recipient is (optional): Committee Non-Committee	6. City/State/Zip: Aug CO 81620 7. Purpose of Expenditure: Post Cards Check box if Electioneering Communication			
1. Date Expended	4. Name:			
2. Amount	5. Address:			
\$ 3.Recipient is (optional): Committee Non-Committee	6. City/State/Zip:			
1. Date Expended	4. Name:			
2. Amount	5. Address:			
\$ 3.Recipient is (optional): Committee	6. City/State/Zip: 7. Purpose of Expenditure:			
Non-Committee	☐ Check box if Electioneering Communication			

Colorado Secretary of State Form Rev. 12/09